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CONFIRMATION NO. 1678

<b>SERIAL NUMBER</b> 10/669,158	<b>FILING OR 371(c) DATE</b> 09/22/2003 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1616	<b>ATTORNEY DOCKET NO.</b> 720109.401	
<b>APPLICANTS</b> Edward A. Neuwelt, Portland, OR; Leslie Muldoon, Tigard, OR;					
<b>** CONTINUING DATA *****</b> <i>yes SA</i> This appln claims benefit of 60/412,494 09/20/2002 and claims benefit of 60/478,383 06/13/2003					
<b>** FOREIGN APPLICATIONS *****</b> <i>None SA</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 12/15/2003					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> May/after met Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> OR	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 25	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> 500					
<b>TITLE</b> Administration of free radical scavengers to prevent or treat ischemia-reperfusion injuries					
<b>FILING FEE RECEIVED</b> 495	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		